

Statement of Organization CANDIDATE COMMITTEE

*Please read instructions before completing this form.

Type of Statement					
<input checked="" type="checkbox"/> NEW This committee is registering with the Virginia State Board of Elections for the first time.	<input type="checkbox"/> AMENDED This committee is filing an amended Statement of Organization. <table border="1" style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 50%;">Date Changes Took Effect</td> <td style="width: 50%;">SBE-issued Committee ID</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>	Date Changes Took Effect	SBE-issued Committee ID		
Date Changes Took Effect	SBE-issued Committee ID				
Committee Information					
Committee Information	<div style="border: 1px solid black; padding: 5px; display: inline-block;"> <i>Elijah A Mayer in 2015</i> </div>				
	Name of Candidate Campaign Committee				
	<div style="display: flex; justify-content: space-between;"> <div> <i>8469 Yellow Leaf Court</i> Street Address/PO Box </div> <div> <i>(Temp)</i> Suite # </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>Springfield</i> City </div> <div> <i>Va</i> State </div> <div> <i>22513</i> Zip Code </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>elijah4mayerin2015.org</i> Email Address </div> <div> Daytime Phone # </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>elijah4mayerinfo@gmail.com</i> Campaign Website </div> <div> Daytime Phone # </div> </div>				
Candidate Information					
Candidate Information	<div style="display: flex; justify-content: space-between;"> <div> <i>Leys</i> Salutation </div> <div> <i>Elijah</i> Last Name </div> <div> First Name </div> <div> Middle Name </div> <div> Suffix </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>8469 Yellow Leaf Court</i> Residence Address </div> <div> Apt # </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>Springfield</i> City </div> <div> <i>Va</i> State </div> <div> <i>22513</i> Zip Code </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>Fairfax</i> County or City of Residence </div> <div> Voter Identification # </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>elijah4mayerinfo@gmail.com</i> Email Address </div> <div> Daytime Phone # </div> </div>				
	<input checked="" type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.				
	Election Information				
Election Information	<div style="display: flex; justify-content: space-between;"> <div> <i>Mayer</i> Office Sought </div> <div> District (if one) </div> </div>				
	<div style="display: flex; justify-content: space-between;"> <div> <i>Independent</i> Political Party </div> <div> <i>2015</i> Year of Election </div> <div> <input checked="" type="checkbox"/> November <input type="checkbox"/> May <input type="checkbox"/> Special Type of Election </div> </div>				



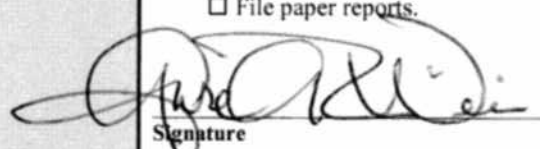
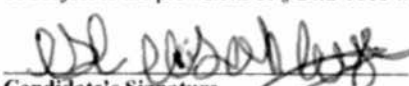
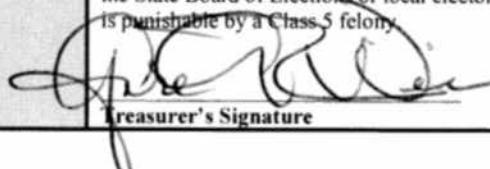
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Treasurer Information					
Treasurer Information	<div style="display: flex; justify-content: space-between;"> Williams André </div>				
	Salutation	Last Name	First Name (Temp)	Middle Name	Suffix
	<div style="display: flex; justify-content: space-between;"> 8464 Yellow Leaf Court </div>				
	<div style="display: flex; justify-content: space-between;"> 3250 ANDREA Lee COURT </div>				
	Residence Address				
	Apt #				
	<div style="display: flex; justify-content: space-between;"> Spillville Georgia </div>				
<div style="display: flex; justify-content: space-between;"> 30039 </div>					
<div style="display: flex; justify-content: space-between;"> Springfield VA (Temp) </div>					
<div style="display: flex; justify-content: space-between;"> State 22513 </div>					
<div style="display: flex; justify-content: space-between;"> County or City of Residence Voter Identification # </div>					
<div style="display: flex; justify-content: space-between;"> eliph A Mayor info@gmail.com </div>					
<div style="display: flex; justify-content: space-between;"> Email Address Daytime Phone # </div>					
<input type="checkbox"/> By checking this box, I certify that I am currently registered to vote at the address above.					
Campaign Depository					
<div style="display: flex; justify-content: space-between;"> SUM TRUST </div>					
Name of Primary Financial Institution			Name of Other Financial Institution (if applicable)		
<div style="display: flex; justify-content: space-between;"> Springfield VA </div>					
<div style="display: flex; justify-content: space-between;"> City State </div>			<div style="display: flex; justify-content: space-between;"> City State </div>		
Committee Activity					
Dates of Activity	Please provide the following dates. (If an action has not yet occurred for this committee, write "N/A")				
	Date first contribution accepted: <u>4/26/14</u>				
	Date first expenditure made: <u>4/28/14</u>				
	Date campaign depository designated: <u>SENATOR 4/14</u>				
	Date filing fee paid for party nomination: <u>N/A</u>				
	Date Statement of Qualification filed: <u>N/A</u>				
	Date treasurer appointed: <u>4/11/14</u>				

(continued on next page)



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Filing Method	
Filing Method	<p>Please indicate the method by which this committee will submit all required campaign finance reports:</p> <p><input checked="" type="checkbox"/> File electronically using SBE's Electronic Filing Application.</p> <p><input type="checkbox"/> File electronically using an SBE Approved Vendor (Please indicate Name of Vendor: _____)</p> <p><input type="checkbox"/> File paper reports.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;">  Signature </div> <div style="text-align: center;"> <u>5/1/14</u> Date </div> </div>
Signatures	
Candidate's Signature	<p>I affirm that, to the best of my knowledge, all of the information on this form is complete and truthful. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I also understand that my Treasurer and I must truthfully report, in a timely manner, all monies and things of value which this campaign committee receives or expends. Civil penalties shall be assessed for late or un-filed reports in the manner required by the <i>Code of Virginia</i>. I further understand that if I do not appoint a treasurer, or if at any time the treasurer's position is vacant, that I, as the candidate, will assume and accept all of the Treasurer's duties until the position is filled. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;">  Candidate's Signature </div> <div style="text-align: center;"> <u>5/30/2014</u> Date </div> </div>
Treasurer's Signature	<p>I accept the appointment of Treasurer of this campaign committee. I understand that I am required to comply with the provisions of the Campaign Finance Disclosure Act (Title 24.2, Chapter 9.3 of the <i>Code of Virginia</i>). I understand that I must truthfully report all monies and things of value which this campaign committee receives or expends in a timely manner. Civil penalties will be assessed in the manner required by the <i>Code of Virginia</i> for late or non-filed reports. I also understand that if I provide false information on this or any document submitted to the State Board of Elections or local electoral boards that I may be subject to the provisions of § 24.2-1016 which is punishable by a Class 5 felony.</p> <div style="display: flex; justify-content: space-between; margin-top: 20px;"> <div style="text-align: center;">  Treasurer's Signature </div> <div style="text-align: center;"> <u>5/1/14</u> Date </div> </div>